

Cardiovascular outcome of SGLT2i (EMPA-REG OUTCOME)

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Type 2 diabetes greatly increases the risk of cardiovascular disease. However, the effect size of intensive glycemic control is only modest. Therefore, control for other cardiovascular risk factors within the frame of the current standards of care (e.g., anti-platelets, anti-hypertensives, statins and other lipid managements, and lifestyle measures) have to be emphasized. It is needless to say that cardiovascular safety is of paramount importance as anti-diabetes drugs. As newer forms of anti-diabetes drugs are introduced to clinical practice, keen interest is being paid whether they have protective, neutral, or detrimental effects in terms of cardiovascular safety. If an anti-diabetes drug also has the cardioprotective property it will be an ideal anti-diabetes drug and will be positioned as the second choice after metformin failure or as the first choice replacing the current position of metformin. Some anti-diabetes drugs may have off-target effects that may contribute to the increased risk of triple or quadruple MACE. In this symposium, cardiovascular outcomes related to the use of the sodium-glucose cotransporter 2 inhibitor will be discussed focusing on the recently published EMPA REG OUTCOME trial.